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DATE: May 10, 2005

FROM:

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TELEPHONE: (303) 938-9999 ext. 21**NUMBER OF PAGES (including this page):**

4

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Application No. 09/723,780
Filed: 11/28/2000
Art Unit: 2643
Examiner: Wing F. Chan
Inv.: Pawan Chaturvedi
Docket No. 1510

MESSAGE Attached are the following:

1. Transmittal (one page);
2. Statement of Substance of Interview with Examiner Chan Conducted April 15, 2005, (2 pages).

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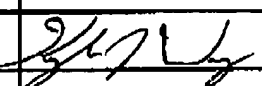
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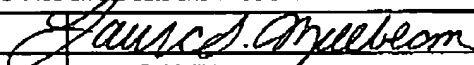
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/723,780; Confirmation 6845	
	Filing Date	11/28/2000	
	First Named Inventor	Pawan Chaturvedi	
	Art Unit	2643	
	Examiner Name	Wing F. Chan	
Total Number of Pages in This Submission	2	Attorney Docket Number	1510

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input checked="" type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Statement of Substance of Interview with Examiner Chan Conducted 4/15/2005 (2 pages)
Remarks It is believed that no fees are due in this matter. However, if it is determined that fees are due, the Commissioner is authorized to debit Deposit Account No. 210765 for the required fees.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm	SETTER OLLILA LLC		
Signature			
Printed Name	Kyle J. Way		
Date	5/10/05	Reg. No.	45,549

CERTIFICATE OF TRANSMISSION/MAILING			
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Signature			
Typed or printed name	Laura S. Mellblom	Date	5/10/05

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Pawan Chaturvedi et al.

Application No.: 09/723,780

Filed: 11-28-2000

Group No.: 2643

Examiner: Wing F. Chan

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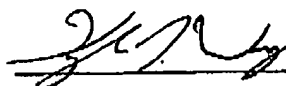
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**STATEMENT OF SUBSTANCE OF INTERVIEW WITH EXAMINER CHAN
CONDUCTED APRIL 15, 2005**

During a telephonic interview with Examiner Wing F. Chan on April 15, 2005, Kyle J. Way, Practitioner, agreed to an Examiner's Amendment of claims 4 and 5 of the present application to amend their dependency from canceled claim 2 to independent claim 1, as specifically noted in the Examiner's Amendment accompanying the Notice of Allowability mailed April 19, 2005. The Assignee thanks the Examiner for his consideration regarding the present application.

Respectfully submitted,

Date: 5/10/05



SIGNATURE OF PRACTITIONER

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